

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION  
USING AN APPLICATION DATA SHEET (37 CFR 1.76)**

**Title of Invention**

**SYSTEM AND METHOD FOR NOISE ATTENUATION OF SCREW  
COMPRESSORS**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

The attached application, or  
 Application No. \_\_\_\_\_, filed on \_\_\_\_\_,  
 as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

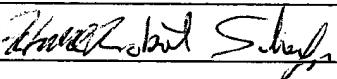
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

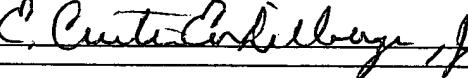
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**FULL NAME OF INVENTOR(S)**

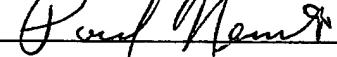
Inventor one: Harold Robert Schentzka

Signature:  Citizen of: United States of America

Inventor two: E. Curtis Eichelberger, Jr.

Signature:  Citizen of: United States of America

Inventor three: Paul Nemt, Jr.

Signature:  Citizen of: United States of America

Inventor four:

Signature: \_\_\_\_\_ Citizen of: \_\_\_\_\_

Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	December 4, 2003
First Named Inventor	SCHNETZKA et al.
Title	SYSTEM AND METHOD FOR NOISE ATTENUATION OF SCREW COMPRESSORS
Art Unit	n/a
Examiner Name	n/a
Attorney Docket Number	20712.0065

I hereby appoint:

Practitioners at Customer  
Number:

26587

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

<input type="checkbox"/>	Firm or Individual Name	
	Address	
	Address	
	City	State
	Country	Zip
	Telephone	Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	Harold Robert Schnetzka		
Signature	<i>Harold Robert Schnetzka</i>		
Date	12-1-03	Telephone	703-225-3557

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

Submit multiple forms if more than one signature is required, see below.

\*Total of 3 forms are submitted.

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**OR**

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<input type="checkbox"/>	Address			
<input type="checkbox"/>	Address			
<input type="checkbox"/>	City	State	<input type="checkbox"/>	Zip
<input type="checkbox"/>	Country			
<input type="checkbox"/>	Telephone	Fax		

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**SIGNATURE of Applicant or Assignee of Record**

Name	E. Curtis Eichelberger, Jr.		
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Signature	<i>E. Curtis Eichelberger, Jr.</i>		
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Date	12-12-03	Telephone	712-721-7145
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<input checked="" type="checkbox"/>	*Total of 3 forms are submitted.
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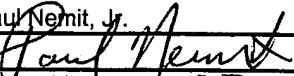
<input type="checkbox"/>	Firm or Individual Name			
<input type="checkbox"/>	Address			
<input type="checkbox"/>	Address			
<input type="checkbox"/>	City	State	Zip	
<input type="checkbox"/>	Country			
<input type="checkbox"/>	Telephone	Fax		

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**SIGNATURE of Applicant or Assignee of Record**

Name	Paul Nemit, Jr.		
Signature			
Date	11-21-03	Telephone	540-345-1315

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